BEST AVAILABLE COP

Application or Docket											ocket Num	ber	
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 9902066													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL		
TOTAL CLÁIMS			15				F	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS) minus 20=		• Ø		7	- (\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =			X40		(40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT				+135=			OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							T	OTAL		OR	TOTAL	710	
4	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						Si	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· BB	Minus	·2	2	=	×	\$ 9=		OЯ	X\$18=		
	FIRST PRESENTATION OF MU		Minus		CLAIN	= 7	>	(40=	120,55	OR	X80=		9
L	FINOT FNESE	INTATION OF MI	JETIFLE DEI	ENDEN	CLAIN		+	135=		OR	+270=		
					/	•	ADD	TOTAL		OR	YOTAL ADDIT, FEE		i
		(Column 1)		(Colur	nn 2)	(Column 3)	700	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•	ADDIT: 1 CE		(
AMENDMENT B	:	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	()
	Total	•	Minus	••		=	X	\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	T	40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEPENDENT CLAIR				\vdash	 :-					7.
							L	135= TOTAL		OR	+270=		
								IT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3 CLAIMS HIGHEST										•		
AMENDMENT C	· ·	REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	·
	Total	•	Minus	**		=	X	\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***		=	X	40=			X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									O.P.	<u> </u>		i
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE OR ADDIT. FEE													
		mber Previously Pai ber Previously Pai					tound in	the ap	propriate box	in col	umn 1.		•